| 131 | Case 17-02/21-iw Doc 24 File I in this information to identify your case: | d 05/31 | /17 Ent | | 05/31/17 11:20 | :00 Desc | Main |
|-------|--|--|--|-------------------------------------|--|---|------------------------|
| | This this information to identify your base. | | | of 2 | 2 | | |
| De | btor 1 First Name Middle Name | Last Name | | - | | | |
| | btor 2 souse, if filing) First Name Middle Name | Last Name | | - | | | |
| | ited States Bankruptcy Court for the: District of | | | | | | |
| | | | | | | | |
| | se number known) | _ | | | | thook if this is a | a amandad filing |
| | | | | | Ц | neck if this is a | n amended filing |
| | | | | | | | |
| Of | ficial Form 122B | | | | | | |
| Cł | napter 11 Statement of You | ır Cur | rent M | lontl | nly Income | 9 | 12/15 |
| to th | must file this form if you are an individual and are filinis form. Include the line number to which the addition ber (if known). | | | | | | |
| Pa | rt 1: Calculate Your Current Monthly Incom- | е | | | | | |
| 1. | What is your marital and filing status? Check one only | | | | | | |
| | ☐ Not married. Fill out Column A, lines 2-11. | | | | | | |
| | ☐ Married and your spouse is filing with you. Fill out | both Colum | nns A and B, | lines 2-1 | 1. | | |
| | ☐ Married and your spouse is NOT filing with you. F | ill out Colun | mn A, lines 2- | 11. | | | |
| | Fill in the average monthly income that you received case. 11 U.S.C. § 101(10A). For example, if you are filing amount of your monthly income varied during the 6 mont Do not include any income amount more than once. For property in one column only. If you have nothing to report | g on Septemes, add the example, if the second secon | nber 15, the 6 income for all both spouses | 6-month 6 month own the | period would be March ns and divide the total same rental property | n 1 through Augus by 6. Fill in the re | st 31. If the sult. |
| | | | | | Column A Debtor 1 | Column B Debtor 2 | |
| 2. | Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions). | | | | \$ | \$ | |
| 3. | Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in. | | | | \$ | \$ | |
| 4. | All amounts from any source which are regularly paid you or your dependents, including child support. Incl an unmarried partner, members of your household, your roommates. Include regular contributions from a spouse Do not include payments you listed on line 3. | ude regular dependents | contributions, parents, and | from d | \$ | \$ | |
| 5. | Net income from operating a business, profession, or farm | Debtor 1 | Debtor 2 | | | | |
| | Gross receipts (before all deductions) | \$ | \$ | | | | |
| | Ordinary and necessary operating expenses | - \$ | - \$ | | | | |
| | Net monthly income from a business, profession, or farm | \$ | \$ | Copy here | ¢ | \$ | |
| 6. | Net income from rental and other real property | Debtor 1 | Debtor 2 | | Ψ | Ψ | |
| | Gross receipts (before all deductions) | \$ | \$ | | | | |
| | Ordinary and necessary operating expenses | - \$ | - \$ | | | | |

Net monthly income from rental or other real property

Copy here→

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Case number (if known)_

| ODIC | First Name Middle Name Last Name | Case Hamber (# kho | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
|------|--|------------------------|--|------------------------------|--|--|
| | | | | | | |
| | | Column A Debtor 1 | Column B Debtor 2 | | | |
| 7. | Interest, dividends, and royalties | \$ | \$ | | | |
| 8. | Unemployment compensation | \$ | \$ | | | |
| | Do not enter the amount if you contend that the amount received was a benefit | | | | | |
| | under the Social Security Act. Instead, list it here: | | | | | |
| | For you\$ | | | | | |
| | For your spouse\$ | | | | | |
| 9. | Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. | \$ | \$ | | | |
| 10. | Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. | | | | | |
| | If necessary, list other sources on a separate page and put the total below. | | | | | |
| | | \$ | \$ | | | |
| | | \$ | \$ | | | |
| | Total amounts from separate pages, if any. | + \$ | + \$ | | | |
| 11. | Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. | \$ | + \$ | = | | |
| | | | | Total current monthly income | | |
| _ | | | | | | |
| Pa | art 2: Sign Below | | | | | |
| | | | | | | |
| | By signing here, under penalty of perjury I declare that the information on this staten | nent and in any attach | ments is true and correct | i. | | |
| | × × | | | | | |
| | Signature of Debtor 1 Signature of Debtor | 2 | | | | |
| | Date | YYYYY | | | | |
| | | | | | | |

Debtor 1